Complete if Known **Application Serial Number** 09/597,881 EETRANSMITTAL Filing Date June 20, 2000 First Named Inventor RADEMACHER, Robert et al. Y 2005 Group Art Unit 3628 **Examiner Name** Frantzy Poinvil Attorney Docket No. 74577-051 METHOD OF PAYMENT FEE CALCULATION (continued) Payment Enclosed: 4. ADDITIONAL FEES ☐ Check ☐ Money Order ☐ Other Entity **Entity** Ø The Commissioner is hereby authorized to credit or charge any fee Fee(\$) Fee (\$) Fee Description Fee indicated below for this submission to Deposit Account No. 16-2500 Paid Surcharge - late filing fee or oath 130 65 Required Fees (copy of this sheet enclosed). Additional fee required under 37 CFR 1.16 and 50 25 Surcharge - late provisional filing fee or cover sheet Non-English specification Overpayment Credit. 130 130 Applicant claims small entity status. 2,520 2,520 Request for ex parte re-examination FEE CALCULATION Extension for reply within 1st mo. 120 60 Extension for reply within 2nd mo. 1. BASIC FILING, SEARCH, AND EXAMINATION FEES 450 225 Extension for reply within 3rd mo. Filing Search Examination Fee Paid 1,020 510 Application 1,020 Type 300 500 200 795 Extension for reply within 4th mo. Utility 1 590 200 100 130 2,160 1,080 Extension for reply within 5th mo. Design

160 Notice of Appeal Plant 200 300 500 250 Reissue 300 500 600 500 250 Filing a brief in support of an appeal Provisional 200 0 0 1,000 500 Request for oral hearing Small Entity Discount Petitions to the Director 400 0 1. TOTAL 180 Submission of IDS 180 Small Entity Filing a submission after final 2. EXCESS CLAIM FEES 790 395 Fee (\$) rejection (37 CFR 1.129(a)) Each claim over 20 or, for Reissues, each claim 50 25 over 20 and more than in the original patent. 395 For each additional invention to be 790 Each independent claim over 3 or, for Reissues, examined (37 CFR 1.129(b)) 200 100 each independent claim more than in the original 100 Certificate of Correction for applicant's 100 patent. Total Claims Submission of Terminal Disclaimer Extra Claims Fee Paid (\$) 110 55 - 20 or HP= HP = highest number of total claim paid for, if great than 20 Other fee (Specify) Request for Continued Examination (RCE) 790 Indep. Claims Fee Paid (\$) Extra Claims Other fee (Specify) - 3 or HP= HP = highest number of total claim paid for, if great than 3 4. TOTAL: 1,810 Multiple Dependent Fee(\$) Small Entity fee (\$) Fee Paid (\$) 180 Claims 360 TOTAL AMOUNT SUBMITTED 2. TOTAL: 1,810.00 SIGNATURE BLOCK 3. APPLICATION SIZE FEE If the specification and drawing exceed 100 sheets of paper, the application Respectfully submitted, size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction there of. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). C. Stellstotte Total Extra Additional 50 or fraction Date: October 18, 2006 Paid Sheets Sheets thereof ohn C. Stellabotte Reg. No..47,969 round up to a Attorney for the Applicants -100 =/50 = whole number 3. TOTAL: Tel. No.: (212)969-3000 Proskauer Rose LLP Fax No.: (212)969-2900 **CORRESPONDENCE ADDRESS** 1585 Broadway New York, NY 10036 Direct all correspondence to:

Patent Department Proskauer Rose LLP 1585 Broadway New York, NY 10036 Tel. No.: (212)969-3000 Fax No.: (212)969-2900

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number Filing Date	09/597,881 June 20, 2000 Robert RADEMACHER, et al		
		First Named Inventor			
		Art Unit	3628		
		Examiner Name	Frantzy POINVIL		
Total Number of Pages in This Submission 26		Attorney Docket Number	74577-051		
ENCLOSURES (Check all that apply)					
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addr Terminal Disclaimer Request for Refund CD, Number of CD(s)	to - Appl of Appl (Appl (Appl Appl Appl Appl Appl Ap	Fechnolo peal Con Appeals peal Con peal Noti oprietary atus Lette ntify belo ransmitte	osure(s) (please ow):

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Date October 18, 2006					
C	ERTIFI	CATE OF TRANSMISSION	N/MAILING		
I hereby certify that this correspondence is b sufficient postage as Express Mail Label # I Commissioner for Patents, P.O. Box 1450,	eing facs ER 33044	imile transmitted to the USPTO o 2521 US mail in an envelope add	r deposited with the dressed to:	United \$	States Postal Service with
Typed or printed name Elizabeth Tavare	z			- "	
Signature Elizab	eth	Savar		Date	October 18, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.